

Long-Term Care Planning Grants – Final Report

Department of Health and Family Services – Division of Disability and Elder Services

Planning Group Name: Dane-Rock Region: Planning for Change in Long-term Care

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Current Planning Partners: Dane County, Rock County, and Care Wisconsin. Community Living Alliance was an original partner bringing its expertise with managed care programs, Wisconsin Partnership and Health Advantage (the SSI managed care program), to bear in the planning process. Their partner status changed with the closing of those programs. Whether or not they would be the physical disabilities provider representative on the committee was not taken up by the Steering Committee due to the on hold status of the planning process.

Section 3 – Strategic Planning for System Change

Original planning partners (Dane County, CLA and Care Wisconsin) initially met and developed a draft framework for implementation planning. This framework (attachment A) guided the beginning of the planning process but as additional information was received about the program and decisions made by the State of Wisconsin concerning program implementation, planning timelines were abandoned and some changes were made to the original planning framework and planning assumptions attached. The planning process began in March 2006. Rock County joined the planning process in June 2006.

A Steering Committee to oversee the project was formed shortly after the grant was awarded. Membership included stakeholders from the two target populations identified in the planning grant (frail elderly and adults with physical disabilities). Membership was expanded to include representatives from developmental disabilities services as well since that system will be impacted by the long-term care planning for frail elders and adults with physical disabilities. Early in our planning process we were notified by the State that the DD system is expected to transition to a managed care model within 1 year of initial program implementation.

Working within the framework originally drafted, the planning process began with the development of a goal statement (attachment B). This document was revised with the addition of Rock County as a planning partner. Letterhead was developed that carries the logo of the planning partners: Care Wisconsin, Community Living Alliance, Dane County and Rock County. From there began a series of educational pieces on service models currently available in Dane County and elsewhere (i.e., Home and Community Based Waiver programs, SSI-Managed Care, Partnership Program, Medicare Special Needs Plans – SNPs, etc). There have been a number of learning opportunities around the State. Some committee members attended an educational summit in Milwaukee, a one-day conference on governance models in LaCrosse, the State's annual Long Term Care Conferences, Aging and Disability Resource Center Conferences and Wisconsin County Human Services Financial Manager's Conferences, all of which included the topic of Family Care.

A number of subcommittees were created to begin the detail work required in developing an Aging and Disability Resource Center and the infrastructure for a managed care organization (MCO). Subcommittees include: Dane County ADRC (began meeting in May 2006), Rock

County ADRC (November 2006), Care Management Organization (CMO) Development (began meeting in July 2006), Communication and Stakeholder Involvement (began meeting in May 2006), and IT/Fiscal (began meeting in June 2006). Both ADRC Subcommittees adopted mission statements to guide their work. (See attachment C).

As part of its financial analysis, Dane County completed the local impact tool available on the Wisconsin website and found it quite helpful in identifying the impact of the loss of waiver administrative revenues on the Human Services Department. We partnered with the Northwest Planning region to discuss the criteria that needed to be considered in this calculation; since counties differ in the way they allocate and report administrative costs. This collaboration on data related issues was invaluable.

The CMO Development Subcommittee completed a gap analysis of the Provider Network in Dane and Rock Counties for all target populations. The conclusions from the gap analysis indicate adequate provider capacity between the four planning partners to accommodate the current waiver participants in Dane and Rock Counties. When assessing the capacity for enrolling wait list clients into the CMO over a period of 24 months, the analysis shows potential gaps in the following areas:

- Rock County: Adult day care, home delivered meals, skilled nursing facilities, transportation and affordable residential services
- Dane County: Personal care and transportation for adults with physical disabilities.

As the planning process proceeded there continued to be concern about the resources available and associated risk with program financing. Concerns routinely were expressed from many different entities as to whether or not Family Care is adequately funded. Dane and Rock Counties contribute local funds to support long-term care programming. The State's original plan for Family Care expansion required counties to maintain their level of support on an annual basis. Dane County is in a unique position in that its local contribution represented 20% of the Statewide local contribution. A number of data related projects concerning client mix, service mix, relationship between services and level of care were completed to gain a better understanding of the existing service system and cost centers.

The IT/Fiscal Subcommittee discussed next steps in data analysis and recommended that an actuarial study be completed to satisfy questions concerning the financing of Family Care in comparison to current operations. Dane County entered into a contract with Milliman Inc. to conduct an actuarial study using the 2006 Managed Long Term Care (MLTC) data set to develop revenue and cost estimates for the expansion of the Family Care Program in Dane and Rock Counties. This report confirmed that a gap exists between costs and revenues (costs being greater than revenues) for this region. Looking at Dane County data only, costs exceed revenue across all target populations as well as for the program overall. Rock County data had similar results with the exception of one target population where estimated revenues (PMPM) exceeded estimated costs (PMPM). For the Rock County program overall, estimated costs exceeded estimated revenues.

A committee report is attached (attachment D), identifying the members and affiliation of the membership of each committee or subcommittee and meeting schedules. An overall draft work plan (attachment E) was developed to guide subcommittee work, specifying deliverables and identifying progress in related areas. In addition, some subcommittees developed more formal work plans that incorporated deliverables assigned to them.

The Steering Committee came to adopt Roberts Rules of Order during their meetings. Most decisions were made with a majority vote though consensus was reached on many issues. Some key issues were identified early in the planning process that required negotiation between the planning partners. A Leadership Team was developed in October 2006 that included representation of the four planning partners. The group met once per month. The Leadership Team determined the Steering Committee agendas, reviewed and approved/declined applications for stakeholders interested in participating on the Steering Committee. The Leadership Team had a more informal means of discussion and typically negotiated issues to the satisfaction of all members. The Steering Committee and all subcommittees with the exception of the two ADRC Subcommittees put planning on hold effective March 6, 2007. County staff determined that the questions of financing: disparity in local contribution being required by Family Care and unanswered questions concerning county responsibility for safety net and adequate resources to maintain safety net services were significant barriers to ongoing committee planning activities. The formal planning process was put on hold and committee meeting schedules cancelled until those county-related questions were adequately addressed. County staff continued to work on addressing and better understanding those issues. There was no question concerning counties operating the ADRCs so ADRC Subcommittees continued to plan the development of an ADRC in both Rock County and Dane County.

The Rock County ADRC Subcommittee met one to two times per month beginning November 2006 through June 2008. In addition, work groups were formed to address every area of the State ADRC application. These work groups met outside the regularly scheduled ADRC meeting times and reported their recommendations to the ADRC Subcommittee for discussion and approval. The ADRC Subcommittee also put together a work plan, which outlined their goals and objectives in the ADRC planning process. (See attachment F).

The Dane County ADRC Subcommittee met every other Thursday opposite Steering Committee meetings starting in May 2006. Effective November 2006 the Subcommittee met on a monthly basis. The larger committee meeting schedule scaled back as a result of two work groups developed in October 2006. The work groups, Operations/staffing and Fiscal and data issues began meeting monthly and eventually met weekly to finalize projects. Both work groups accomplished their assignments and the reports to the full committee facilitated continued progress in planning. (See attachment F).

Jean Kuehn was assigned as project manager for Family Care expansion in this region. She is a Dane County employee and has extensive experience with the COP and Waiver programs. Jean serves as Dane County's COP Coordinator. Her responsibilities for this project included facilitation and coordination of Steering Committee meetings, coordination and oversight of the subcommittees' work, developing an overall work plan draft for the project including subcommittee assignments, developing contracts as needed, providing information and presentations on this region's planning process to interested parties, completing reporting required by the grant, providing informational pieces and data analysis, etc. She has an M.A. in Public Policy and Administration from the University of Wisconsin, Madison, LaFollette Institute. A primary project contact from each of the planning partner organizations was designated at the beginning of the planning process to facilitate quick communication with members.

The Management Group (TMG) was under contract with Dane County to provide consultation, facilitation and data analysis. TMG facilitated initial discussions on governance structure and benefit package analysis, met with each of the planning partners to determine preferences and identify issues, developed educational materials and presented a variety of model options for consideration. This initial work narrowed our focus of governance model options for

consideration. As the planning process proceeded it was the decision of the planning partners to use TMG more strategically, specifically for identified projects rather than ongoing planning/facilitation activities.

Miliman, Inc was under contract to Dane County to provide analysis on rate setting. Dane and Rock Counties were interested in the development of revenue and cost estimates for the expansion of the Family Care Program in this region.

Mary Brintnall-Peterson from the UW Extension presented to our Steering Committee on stakeholder involvement, education and input. She also provided review and comment on the communication plan that was originally developed by our communication and stakeholder Involvement Subcommittee.

Initially, the Director of the Rock County Council on Aging facilitated the Rock County ADRC Subcommittee meetings with assistance from the Directors of the Human Services Department and Developmental Disabilities Board. On February 21, 2007 the Rock County ADRC enlisted the skills of Anne Rodgers-Rhyme of Organizational Skills Associates (OSA). Ms. Rodgers-Rhyme, with the assistance of ADRC members, created agendas and formalized the common message from each meeting. She facilitated the meetings and kept the subcommittee on track when agenda items spiraled into long indecisive conversations. Often, she would offer suggestions to the subcommittee when a task could not be resolved. In addition, she encouraged stakeholder participation in our planning efforts.

Dane County entered into a contract with Anne Rogers-Rhyme in January 2007 to work with its ADRC subcommittee. The ADRC co-chairs worked with Ms. Rodgers-Rhyme prior to each meeting. A work plan was established. She worked with the subcommittee and established: ground rules, location and time of meetings, described the "common message" system, and talked about requiring a feedback system. This process formalized at subsequent meetings.

The Dane County Executive and Rock County Administrator talked at intervals and met to discuss the planning process, mutual goals and concerns as well as regional partnership. Both were routinely briefed by their respective staff. No final decision has been entered into with respect to a regional Family Care operation. Both leaders agreed to maintain the current status and bring that issue back to the table when appropriate.

Oversight committees in both Dane County and Rock County were routinely briefed on the planning activities underway. Family Care planning was also a primary agenda topic at various intervals. In Rock County this included the Human Services Committee, Developmental Disabilities Committee, Council on Aging Advisory Committee, Education Committee, Veterans and Aging Services and the Long Term Support Committee. In Dane County this included the Health and Human Needs Committee, Human Services Board, Area Agency on Aging Board and the Long Term Support Committee. In Dane County, these oversight committees held joint meetings at times to discuss Family Care. In June 2008, Dane County's oversight committees met jointly to discuss the Family Care issue paper that had been released. That meeting resulted in the decision by the Chairs of those committees to meet and develop a plan and calendar for further study of Family Care. During the planning process, input from these boards and committees was shared with the appropriate planning committee or subcommittees to aid in their continued planning efforts.

Dane County's Human Services Board took the lead in educating itself on the various components of Family Care with a series of meetings held between December 13th, 2007 and

March 27th 2008. Agenda items included ADRC planning, background information on Family Care, Statewide planning of Family Care and the progress and status of local planning, private Family Care MCO model, SDS waiver (known as IRIS), and discussion of Family Care IT and business infrastructure.

A series of town hall meetings were held in both Dane and Rock Counties. Those meetings were open to the public and county board members often attended. All meetings were very well attended, and gave elected officials, consumers and other stakeholders an opportunity to voice their opinions.

Corporation Counsel from Dane and Rock County discussed legal implications of the various model governance structures. No outside legal counsel was used.

Section 4 – Consumer and Stakeholder Participation

Early in the planning process we felt it important to include stakeholders in planning activities. There was significant discussion of how to incorporate stakeholders in a meaningful way. Consumer representatives from the two target populations covered in the grant (frail elders and adults with physical disabilities) were added to the Steering Committee in May 2006. In June, we added stakeholders from the developmental disabilities target population in response to concerns that this target group not be left out of the planning discussions, because they were not part of the planning grant. In October 2006, the committee was informed by the State that developmental disabilities' services would need to transition to Family Care no later than 12 months after Family Care was implemented in the region. A decision was made at that time that we would plan for all three target populations in this planning process. In December 2006, Dane County's Aging and Disability Resource Center (ADRC) Subcommittee formalized consumer representation on the committee. Consumers and guardians representing people with physical disabilities, developmental disabilities and the elderly participated on the ADRC Subcommittee. In addition, a representative from the United Way was an active participant. The ADRC Subcommittee also collaborated with Rock County. Two members of the Rock County Planning Group also served on the ADRC Subcommittee in Dane County until they felt it was necessary to create their own ADRC planning subcommittee. Rock County's ADRC Subcommittee included consumers as active committee members as well.

In February 2007, the Steering Committee increased the number of consumer/stakeholder representatives on the committee in response to feedback received at town hall meetings. Stakeholders were very interested in being involved and kept informed of the planning process.

A schedule of town hall meetings was established at the beginning of our planning process as opposed to scheduling these meetings when certain milestones were met. This was our firm commitment to informing interested parties of what was happening in the planning process at the point in time of the town hall meeting. In Dane County town hall meetings were held at the Alliant Energy Center at 2 p.m. and 6:30 p.m. for each session. In Rock County town hall meetings were held at the Rock County Job Center at 4 p.m. and 6:30 p.m. on the scheduled dates. Though separate meetings were held in Rock and Dane Counties, the same agendas and Power Point presentations were used. The separate locations and two meetings on the scheduled dates were for the convenience of consumers and stakeholders and meant to enhance participation. These meetings proved to be excellent forums for stakeholders to ask their questions and voice their concerns about what was happening in the planning process here and Statewide. The information and feedback from these meetings was brought back to the Steering Committee, and action was taken based on some of the information received.

September 6, 2006: Dane County's first town hall meeting agenda included introduction of the planning partners, a Power Point presentation providing overview and background information on long-term care in Wisconsin and planning progress to date, and a question and answer period. Attendees were primarily consumers and providers. Many questions focused on how Family Care would affect each stakeholder and how it would affect service delivery (would services be delivered differently than they are through the HCB waivers).

October 5, 2006: Rock County's first town hall meeting. Agenda was the same as the September 6th meeting held in Dane County with a similar outcome. Questions from consumers and providers focused on how Family Care would affect individual's services and service delivery.

November 13, 2006: Dane County's second town hall meeting. Agenda included an update on the progress of the planning process; a Power Point presentation focused to ADRC's, their role in long-term care, progress to date in ADRC planning, review of the mission statement, and time for questions and answers. Questions were raised concerning the structure of the ADRC as to whether it would be centralized or decentralized, what role would the current aging focal points play with this new entity, and will ADRC funding be adequate. More questions were received concerning how Family Care implementation would affect current services. There was also discussion about stakeholder participation in the planning process and a request that representation on committees be increased. Subsequently the Steering Committee and ADRC Subcommittees increased membership of consumer/stakeholder representatives in response to that input.

January 8, 2007: Rock County's second town hall meeting. Agenda was the same as the November 13th meeting held in Dane County. Comments included concern for inclusion of the DD target population in the planning process, what is the timeline for ADRC implementation, concerns for the location of the ADRC, will services change, etc.

February 7, 2007: Dane County's third town hall meeting. Agenda included a Power Point presentation of progress to date, key tasks over the next 6 months for Family Care Planning and key tasks over the next 6 months for ADRC planning and the steps that would follow the planning grant. A flip chart was set up and the meeting concluded with participants sharing their observations, advice and questions about Family Care and the planning process. The Communication and Stakeholder Involvement Subcommittee met to review the comments received in both counties and identify themes: Self-directed supports, ADRCs, provider concerns and Family Care impacts on consumers. The Communication subcommittee's recommendation to the Steering Committee was to develop a plan for the use of focus groups to discuss emerging issues and what to do about them. The original plan for the February town hall meeting was that the participants would form small groups, discuss concerns and issues within their groups and record those issues on flip charts for broader discussion. It was quickly determined that the town hall forum was not appropriate to small group discussion and focus groups would be a better means for gathering specific input from stakeholders.

May 21, 2007: Dane County's fourth town hall meeting. Agenda included long-term care planning progress and updates (grant period extended), ADRC video, ADRC Subcommittee updates and a period for questions and answers. Questions were raised about ADRC operations, funding, provider concerns and concerns for changes in services to consumers.

May 30, 2007 Rock County's third town hall meeting. Agenda was the same as the May 21st meeting held in Dane County. Questions and feedback focused on ADRC funding, how the

ADRC would represent service providers, and how current consumers would transition to Family Care.

December 10, 2007 Family Care Planning informational meeting held in Dane County. Notices were mailed to consumers and families, email notices sent to providers, advocacy groups, County committees and other interested parties. Dane County continued to get questions from advocacy groups, providers and other stakeholders concerning the status of Family Care planning when Family Care committees, with the exception of the ADRC subcommittees, were not actively meeting. Agenda included: Welcome, update on Dane County's planning progress with Family Care and the ADRC, update on Family Care statewide including the State budget, anticipated expansion over the next biennium and the Family Care models being implemented (public model and private HMO model), presentation by Community Living Alliance and Care Wisconsin on their planning for implementation in the counties to our east, discussion of the pros and cons of the two service models. The meeting was well attended. Participants had many questions about Family Care planning in this region as well as questions about the models that are being implemented around the State. The discussion of the pros and cons of the two service models dissolved into a question and answer session of general issues and concerns of the participants.

April 22nd and April 30, 2008: Family Care Planning Informational meetings for Dane County Human Services staff. Agenda included: Welcome, a Power Point presentation - introduction to Family Care, Current Waiver operations – a program perspective and fiscal perspective, ADRC discussion – implementation/staffing, etc, Family Care models (public model and private model), panel discussion – impacts and why you should care about Family Care implementation, and time for questions and answers. Both of these meetings were very well attended. Staff submitted questions in advance of the meetings as well. Questions included concerns for the impact of Family Care on the organization, the organizational chart as well as staffing implications for those currently working in long-term care programs as well as those persons working in other Department divisions. There was a lot of discussion and the forum provided staff an opportunity to air concerns and obtain information about the planning timeline, the fiscal impact of Family Care on all divisions and gain a better understanding of the potential changes and opportunities that will be part of Family Care and ADRC implementation.

June 3rd, 2008: Joint meeting of Dane County Human Services Oversight Committees (Health and Human Needs, Human Services Board, Long Term Support Committee and Area Agency on Aging Board) to review the Family Care Issue Paper that was developed and the planning process. This was a publicly posted committee meeting. Outreach was made to all purchase of service (POS) providers, advocacy groups, consumers and their families and other interested parties. Agenda included public comment. People spoke in support of and in opposition to Family Care in this region. The outcome of this meeting was the development of a plan for further study and analysis completed by the Chairs of these committees. A calendar of joint meetings was established as well as identification of potential presenters for the various topics.

Public comment is a fixture on the agendas of all Rock and Dane counties' committee meetings. When Family Care was on an agenda, stakeholders routinely attended to provide comment. Public comment was also added to the Planning For Change in Long-term Care Steering Committee meeting agendas effective January 25, 2007.

Members of the Dane County and Rock County ADRC Subcommittees were required to share the common message from each meeting and bring comments back to the subcommittee for discussion. Membership was diverse, therefore the common message was shared with a

variety of people, groups, and organizations including but not limited to: veterans, LTS staff, consumers and planning committee, developmental disabilities staff and consumers, League of Women Voters, county administration, and the Health Department. The Rock County ADRC Subcommittee also sent surveys to county providers (attachments G and H) to get their opinion of the ADRC development. Of all the contacts made, it was the input from our counties' committees that was most beneficial as they represent the community as a whole. It was also beneficial to have consumer members on the ADRC Subcommittee, since the ADRC's governing board includes representatives from all three target populations.

As reported earlier, Mary Brintrnall-Peterson from the UW Extension met with the Steering Committee on August 24th, 2006. She presented educational materials and discussed with the Steering Committee an introduction to stakeholder involvement, tools for garnering public participation and input. She also provided input and feedback on the draft Stakeholder Involvement and Input Plan developed by the Communication and Stakeholder Involvement Subcommittee.

Section 5 – General Communication

Dane County Human Services' website included a page related to Long-Term Care Planning. At the recommendation of our Communication and Stakeholder Involvement Subcommittee a separate website (<http://www.danerocklongtermcare.org>) for the planning process was established so those outside of Dane County Human Services could access the information without going through the Department website. Steering Committee members and affiliation, meeting schedule, meeting minutes and materials are posted on the websites. The town hall meeting schedule and materials shared at those meetings, Dane County ad hoc Family Care informational meeting dates, Dane County's ADRC Subcommittee agendas and minutes were all posted to the websites. The Rock County ADRC Subcommittee developed a separate webpage for the Rock County website <http://www.co.rock.wi.us/Dept/adrc/adrc.htm>. This page explains what an ADRC is, the mission/vision statements, meeting schedule and minutes, links to important State websites, and a link to our provider survey. This webpage also includes a "Contact Us" button to email questions or comments.

In addition to using our web pages to keep the public abreast of planning activities advance notices of the town hall meetings were mailed to current waiver participants and families, email notices of these meetings were also sent to POS providers, advocacy organizations, and County Board members. LTC planning subcommittees were notified and asked to pass the information on to interested parties and committees. Press releases were also written in advance of town hall meetings.

Both ADRC Subcommittees utilized the common message strategy. This strategy was helpful in getting information out and gathering feedback from a broader array of consumers and other stakeholders. This effort was quite useful in getting input from the public.

The Project Manager and planning partners were asked to present to various organizations during the planning process. Some of those included the Family Care Corp Training held by the Coalition of Wisconsin Aging Groups, the DD Children's Provider Network, and the DD Coalition.

Media contacts during the planning process included a contact from The Wisconsin State Journal and subsequent article, "Fuss Over Family Care" appeared April 8, 2007. Another local newspaper, The Isthmus, has made contacts during the planning process posting articles in March 2007 and again in June 2008.

Section 6 – Program Development

We began our work with an initial discussion and questions regarding governance and the complex issues surrounding it, what roles each party will play, how will the funding work, who will be willing to accept risk, etc. The next meeting was spent reviewing four separate governance models and initial feedback for each. At the time this work was completed DD services were not an active participant in the planning process. In anticipation of the adult DD target population transitioning to Family Care at a future point, comments on the models also included implications or concerns of each model on the adult DD population. These comments were labeled “DD worry list”. Please see attached Governance models and comments generated by the Steering Committee on each model (attachment I).

The Steering Committee also reviewed a 5th model, the County Co-purchasing model and many members attended the one-day meeting in LaCrosse for the presentation of this model. Planning partners did develop a 6th model for consideration by the Steering Committee, the DHFS and County Co-Purchasing model. Given the number of options to consider, between meetings members were asked to consider these models further and develop additional pros and cons for each. Questions for evaluation of governance models were developed to help guide the evaluation process. (See attachment J).

The Steering Committee narrowed the number of models to consider to two, the County as CMO model and the DHFS and County Co-Purchasing model. The Wisconsin Partnership Program is operating in Dane County. Rock County was interested in discussing its expansion to their county as well so a long-term care model integrating acute and primary care would be an available alternative in this region. Due to the significant financial investment required of the counties by Family Care, Dane and Rock Counties felt a strong need to consider a managed care model that included county involvement in the administration of the program. Subsequent feedback from DHFS indicated that the Co-Purchasing model, a third party contract model would not be acceptable to DHFS. The Leadership Team then took responsibility for further development of the details of a County as CMO model (attachment K) using the State’s Readiness Template as a guide for discussing the roles and responsibilities of the partners in the various functions of an CMO’s operations. This model has not been formally adopted by policy makers in Dane or Rock Counties. This initial draft (not fully developed) was created as an option/alternative to a private Family Care MCO model that would be considered by policy makers in Dane and Rock Counties. A Family Care issue paper was written to provide background information on long-term care planning to policy makers. A summary list of county impact for the private versus public MCO models was identified in that paper (attachment L).

Legal and Operational Platform for Regionalized Governance – Corporation Counsel from both Dane and Rock counties reviewed the two options for regionalizing governance, the Family Care District and the 66.0301 agreement. Potential issues to consider were identified for each of those options. During the course of the planning process changes were made to State Statutes with regard to the Family Care District, which has made that option more favorable to the counties planning to expand in this biennium. A decision to pursue a regional model has not been made.

Establishment of Risk Reserve and Business Solvency Plan – The IT/Fiscal Subcommittee was charged with developing a timeline and financing strategy to achieve the required risk reserve and to create and document methodology to achieve and sustain business solvency. There was preliminary discussion only on these items. Both the timeline and financing strategy

would be impacted by when the County would plan to implement Family Care as well as whether or not the County would be the CMO, a regionalized model would be chosen, or some other governance model chosen. Additionally, the Leadership Team received some education on risk reserve and business solvency as part of a larger discussion of the various types of risk associated with managed care. The Leadership Team's focus was how risk would be shared and incorporated in the County as CMO model. This work is in progress.

Coordination or Integration with Acute and Primary Health Care - Because there was interest in developing a public CMO model, the planning partners agreed initially to plan for the coordination of acute and primary care in its Family Care model. An HMO license is required with integration of acute and primary care.

Establishing a Governing or Oversight Board - This stage was not reached in the course of the planning process.

Implementation and Management Plan for Care Management Provision - The public CMO draft model assumed that the care management functions would be largely a contracted service though an opportunity for the County Human Services Department to continue to be a provider is also an option. In the draft model providers included planning partners CLA, Care Wisconsin, County Human Services Department as care management providers, and a placeholder for a possible care management provider specializing in Developmental Disabilities services. The Leadership Team was in the process of discussing the responsibilities of each partner in the provision of care management. The decision for where the related administrative responsibilities would lie was also in process. Whether those functions would be centralized with the CMO or part of the contracted service package with the provider was part of that discussion.

Provider Network Development The CMO Development Subcommittee completed a gap analysis of the regional provider network reviewing service capacity issues in Dane and Rock Counties and determined that there was sufficient capacity to service existing waiver consumers in Dane and Rock Counties and identified services of potential concern for provider shortages. Whether the provider network development would be a contracted business function in the public CMO model or a centralized function of the CMO was discussed, but a final recommendation was not reached.

Provider network development also included a review of the DHFS contract as it relates to the provider network, pulling together sample provider contracts, sample policies concerning service quality, sample quality management programs for the network and sample position description for the Provider Network Developer. A binder of these materials was put together as a resource for the CMO.

Administrative and Financial Systems – The IT/Fiscal Subcommittee was charged with the responsibility of completing a needs assessment for administrative and financial systems and identifying management tools necessary for managing long-term care services. The Subcommittee began this work with a review of the administrative and financial systems of planning partners with managed care experience. The IT/Fiscal Subcommittee also looked at the administrative and financial systems of other Family Care counties along with systems available for purchase. An incomplete analysis was done as to what parameters should be considered in determining whether those systems should be developed internally or purchased externally. In addition, the Leadership Team was responsible for recommending whether these

systems should be centralized with the CMO or whether the CMO would contract for these systems. If the CMO chose to contract for these systems, what information and what system would the CMO need to adequately manage the program and meet its oversight responsibilities? These discussions were in process. A cost model for IT/business infrastructure start-up was developed for discussion purposes. The costs associated with each component of that model could vary based on whether components are purchased or developed.

Information Technology and Reporting Systems – The IT/Fiscal Subcommittee was charged with reviewing the essential IT and reporting tools necessary to operate the ADRC and the CMO. With the assistance of Rock County and Dane County IT staff, the Subcommittee reviewed the software requirements of the ADRC’s IT system, reviewed and demonstrated the Beacon Information and Referral software that DHFS made available to counties, analyzed the Beacon software, identifying issues and challenges. Rock County’s Council on Aging already has the Beacon Information and Referral software. The IT/Fiscal Subcommittee brought to the Steering Committee its recommendation for Dane County to implement Beacon software in its ADRC. The recommendation was approved, and no further action was taken in Dane County. Rock County Council on Aging populated its database for the ADRC during the planning process. The IT/Fiscal Subcommittee also reviewed claims software packages. An IT cost model was developed based on preliminary cost estimates assuming that the IT system would be developed within the CMO. The cost model could change significantly if the IT system was purchased. The Leadership Team reviewed the claims process in place with Care Wisconsin as part of its work in identifying the roles and responsibilities of the partners for various business functions.

Quality Management Systems – Preliminary discussions of the Leadership Team identified the CMO as maintaining or housing the quality management system though quality management would be a function at the service level as well and a responsibility of all partners.

Eligibility and Enrollment Systems – The CMO Development Subcommittee had this topic as one of its charges. The planning process did not progress to the point where this was addressed.

Coordination with Adult Protective Services and Statutory Requirements – The impact of Family Care implementation on Adult Protective Services (APS) was an issue of concern identified very early in the planning process. This item was placed on the Steering Committee Issue Log in April 2006. Concerns included:

- Adequate funding for APS services in a managed long-term care environment
- Counties continued responsibility for people who will not qualify for the Family Care benefit, but are court-ordered to the county for services when the counties’ service systems may be largely dismantled as a result of Family Care
- Counties’ continued risk for serving court-ordered individuals who are eligible for the Family Care benefit, since enrollment cannot be mandated
- Lack of incentive for a private CMO to maintain court-ordered individuals in the community

These concerns were also addressed directly to the Secretary of the Wisconsin Department of Health and Family services. Since a final decision was not made on the Family Care model for this region, no further work was completed on the coordination of Adult Protective Services.

Conversion of Present Waiver Caseload and Waiting Lists – The CMO Development Subcommittee discussed the timeline for conversion, recommending the State’s guideline for converting existing program members to Family Care within the first 6 months of program operations and working to serve individuals on the waiting list over a 24 month period. Since the planning process did not reach the point of establishing a timeline for Family Care implementation, the specifics for conversion were not addressed in detail.

Section 7 – Aging and Disability Resource Center (ADRC) Planning

Dane County and Rock County began ADRC planning in partnership. Two members of the Rock County planning group served on the Dane County ADRC Subcommittee until the decision was made to have an ADRC in each county. At that point, Rock County saw the necessity to create their own planning committee to include local stakeholders as well. Joint ADRC meetings were typically held in Dane County. Though alternate meeting locations closer to Rock County were explored, the distance was prohibitive to having representation from Rock County stakeholders. The decision to plan for an ADRC in each county of this region was made by consensus of the counties’ planning partners (our private partners deferred on this decision since this was clearly a county matter). The size of these two counties and the fact that there is a large urban area in each county led to the decision to plan for an ADRC in each county. A commitment was made to plan jointly in areas where we might achieve some administrative efficiencies such as 24/7 on call, software development, marketing, etc. Rock County Council on Aging already has the Beacon software package. Grant funds were used to populate the database. It was recommended that Dane County also use Beacon software though no investment has been made to date. Using similar packages will provide an opportunity to collaborate on its uses and further development in both ADRCs.

The Rock County ADRC Subcommittee has been organized since November 2006 and has convened meetings at least monthly through June 2008. With a mission statement to guide its work, the Rock County ADRC Subcommittee obtained input from the community through a town hall meeting specific to the Rock County ADRC, shared a common message with county boards, local providers and community members after each ADRC meeting and mailed a provider survey to local agencies to obtain their thoughts and opinions. Survey response was 12%, not enough to draw significant conclusions although of the 12 providers responding 10 were interested in participating in focus groups. Each meeting focused on how the Rock County ADRC would accommodate the requirements as noted in the state ADRC application. Committee members met outside meeting times, made recommendations to the group as a whole, discussion was held, and recommendations were made and put into a report format. When the decision is made to open an ADRC, the recommendations/report will be updated to the current situation in Rock County and forwarded to the County Administrator and County Board for approval. Currently, the Rock County ADRC planning efforts are put on hold until the fiscal issues with regard to Long Term Care Reform are resolved with Dane and Rock Counties.

In the spring of 2006 following the appointment of the Steering Committee, an ADRC Subcommittee was organized to define the service model for creating an Aging and Disability Resource Center. The Subcommittee was comprised of 22 members representing a variety of agencies including: Community Living Alliance, Care Wisconsin, Department of Human Services, Economic Assistance staff, Tellurian, Access to Independence, Mental Health Center, aging focal points, United Way, and eventually elderly consumers and consumer representatives for the developmentally disabled and physically disabled. Meetings were originally scheduled every other week opposite Steering Committee meetings. The Subcommittee’s first task was the development of mission and goal statements to guide its

work. Each member agency of the ADRC Subcommittee completed the “ADRC Service Descriptions Compare to Agencies Services” template. This inventory enabled members to become more familiar with their colleagues on the Subcommittee. The inventory also became a launching point for the Subcommittee’s work, defining the starting point, the existing service system, and where they needed to go in the planning process. Two workgroups were also created during the planning process to examine ADRC operational issues and staffing, and fiscal and data related issues. The Subcommittee met through June 21, 2007 completing all of the tasks that were defined on its work plan and completed work that was feasible pending the application process.

Section 8 – Major Milestones

Steering Committee milestones include:

- Development of a Goal Statement to guide the planning process
- Inclusion of consumers, consumer representatives/stakeholder in the planning process

ADRC milestones include:

- Participation by a diverse group of providers and stakeholders selected as subcommittee members
- Development of a Mission Statement and Goals
- Information and Referral software implemented in Rock County and recommendation for software for the Dane County ADRC
- Creation of an inventory of ADRC services provided by county government and provider agencies in Dane County
- Outreach to existing ADRCs, site visits to ADRCs in Racine County and LaCrosse County, hosted Stephanie Stein, (Milwaukee Dept. of Aging) at a Subcommittee meeting and hosted Barron County ADRC staff at a meeting as well.
- Completed work plan tasks and reviewed ADRC application requirements. ADRC planning has proceeded as far as it can go without a decision on the Care Management Organization

Communication and Stakeholder Involvement milestones include:

- Development of a Communication and Stakeholder Involvement plan that was adopted by the Steering Committee. This plan guided the work of all committees with respect to stakeholder involvement.
- Town hall meetings held at intervals throughout the planning process and informational meetings held thereafter were very well received and proved to be excellent forums for reaching consumers, family members, providers, Human Services Department staff, advocates, etc. and receiving input from participants. The information received at these meetings was routinely discussed by the Steering Committee, and action was taken on a number of issues raised in these meetings.
- Deployment of the planning website

CMO Development Subcommittee milestones include:

- Completed work on Provider Network tasks, which included a gap analysis of the provider network in Dane and Rock Counties and assessed capacity for enrolling wait list clients as well as current program participants.
- An inventory was developed for the following areas: policies, position descriptions, quality monitoring programs and provider contracts.

The IT/Fiscal Subcommittee completed the following tasks:

- Reviewed and parsed data from the initial data disk provided by the State

- Reviewed software requirements for the ADRC's IT system and made a software recommendation to the committee
- Analyzed local contribution data that was provided by the State to help determine cost of current and future consumers
- Recommended an actuarial study following the release of the second MLTC data set.

Leadership Team

- Creation of this small work group, planning partners' representatives only, provided a forum for partners to better communicate with one another. Decision-making between the partners was much improved as was setting the course for the planning process on an ongoing basis.
- Began the detail work of defining the draft CMO model working through the "Readiness Template" to begin to define the roles and responsibilities of the partners with respect to the various CMO functions. (See attachment M)

Though this region will complete the grant period without a specific recommendation for implementation of Family Care in this region and no request for a request for proposal (RFP) from DHFS for managed long-term care at this time, a lot of work, time and energy was invested in this process by many people. Committee members were very committed to this work and shared their desire to develop the best system of care for the members of this community. ADRC planning was completed to the point where the CMO model decision must be made before any further work can be done. Many educational presentations were made to provide participants with background information on the many complex issues related to managed care. Much deliberation was made about governance models and a draft of a public model was chosen to further explore though policy makers in Dane and Rock County did not come to the point of recommending a direction for Family Care in this region. This region is unique in regard to its financial contribution to long-term care as well as the well-developed system of care already in place. The opportunity of Family Care, the elimination of waiting lists for people needing long-term care services must be weighed along with the impact of the potential dismantling of the well-developed, well-regarded system of care currently in place. Policy makers will continue to deliberate this matter after the grant process.

The timeline and original planning framework were largely abandoned when the "parking lot" issues such as the local contribution required, and the impact of this program on safety net services (Chapters 51 and 55 issues), etc. were not resolved. These were rather large uncertainties to overlook and continue planning in spite of these unknowns and in fact this region chose to put its planning committees' work on hold (with the exception of ADRC planning) while county staff worked on these issues. Decisions were made by the State during the planning process that addressed these issues, perhaps not to the satisfaction of this region. Dane County's local contribution over the 5-year buy-down plan that was included in the State budget bill is significantly greater than that of any other county in the State. This investment and concern about the adequacy of the financing and quality/quantity of services for Family Care were the greatest challenges to progress in the planning process. The results of the actuarial study completed support this concern. Results indicate a significant gap between program costs and estimated Family Care revenues based on 2006 MLTC data. This region will continue to work on these issues.

Section 9 – Budget Narrative

See attachment N.

Section 10 – Next Steps/Implementation

In Dane County the Chairs of the Health and Human Needs (H&HN) Committee, Human Services Board (HSB) and Long-Term Support (LTS) Committee with a representative of the Area Agency on Aging Board met on June 20th, 2008 to formulate a plan for the continued study/analysis of Family Care.

- It was determined that H&HN, HSB, LTS and AAA will meet jointly for these Family Care discussions. Agendas will be posted accordingly.
- A courtesy invitation to these meetings should be extended to Rock County staff involved in the Rock County planning.
- A meeting on Family Care of the whole County Board should be held, as many Supervisors do not know about the topic.
- Outside speakers should be invited when appropriate.
- All meetings will be held at the Job Center Ballroom to insure there is space for all who wish to attend.
- Meetings will begin at 5:30 p.m. so that the committees can meet at 5:00 p.m. to act on regular business as needed.
- Four major areas of study were listed
 - Models, include the implications of each for the County, consumers, taxpayers as well as pros and cons
 - Capitation rate
 - Local contribution
 - ADRC

The following meeting schedule was agreed upon

- Thursday, July 24th, 5:30 p.m. – District model: Jim Canales, Director, Community Care of Central Wisconsin, presenter
- Tuesday, August 12th, 5:30 p.m. – Private model: Care Wisconsin, presenter
- Tuesday, August 26th, 5:30 p.m. – County operated model and interagency agreement: Presenter TBD
- Tuesday, September 23rd, 5:30 p.m. – Local contribution and capitation rate: staff and Milliman, Inc., presenters
- TBD: ADRC presentation